

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034013	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 01/08/2016
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NAME OF PROVIDER OR SUPPLIER SHULER HEATH CARE/STOREY VILLA	STREET ADDRESS, CITY, STATE, ZIP CODE 250 PITT STREET KERNERSVILLE, NC 27284
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C 000 Initial Comments

This report is of a Biennial Construction Survey done by Bob Getchell on January 8, 2016.

This facility was first licensed as a Home for the Aged serving 12 ambulatory residents on January 10, 1980. Therefore the facility must meet the 1977 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1978 North Carolina State Building Code Section 409 - Institutional Unrestrained Occupancy.

Deficiencies were noted which will require a new plan of correction.

C 000

C 101 Existing Licensed Fac- No less than '71 Rules

SECTION .0300 - PHYSICAL PLANT
10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS
The physical plant requirements for each adult care home shall be applied as follows:
(2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;

This Rule is not met as evidenced by:
1. Based on observation, the building fire

C 101

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Shuler Admin. 2-2-16

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SHULER HEATH CARE/STOREY VILLA

**250 PITT STREET
KERNERSVILLE, NC 27284**

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C 101 Continued From page 1

detection equipment was not installed in all spaces in accordance with the NC State Building Code in effect at the time of construction. This would affect all residents by not detecting smoke, activating the fire alarm, and directing residents from the building.

Findings include:

- a) The Med room has no smoke detection or heat detection tied into the fire alarm
- b) The corridor bathrooms have no smoke detection or heat detection tied into the fire alarm.

C 111 Must Have Current San. & Fire Safety Reports

SECTION .0300 - PHYSICAL PLANT
10A NCAC 13F .0302 DESIGN AND
CONSTRUCTION

f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.

This Rule is not met as evidenced by:

- 1. Based on observation, current reports were not available at the time of the survey.

Findings include:

The Sanitation report for the building was not available at the time of the survey.

C 133 Bathrooms-Hand Grips

SECTION .0300 - PHYSICAL PLANT
10A NCAC 13F .0305 PHYSICAL
ENVIRONMENT

- (e) The requirements for bathrooms and toilet rooms are:
- (6) Hand grips shall be installed at all

C 101

C 111

C 133

The alarms are in the hallways outside of areas noted. All governing agencies have always approved of footage and safety devices in place since 1981. There are battery operated devices in the 3 bathrooms.

Reports were given to surveyor.

Repairs are scheduled 2-20-16

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C 133	Continued From page 2 commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1. Based on observation, the facility was not maintained in a safe manner by having a loose grab bar Findings Include: The tub bathroom has a loose grab bar at the tub.	C 133		Repaired 1-22-16	
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, egress from all areas was not maintained in a safe manner by having corridors blocked by furniture. This would affect all residents by not allowing free egress in an emergency. Findings include: The exit corridor has wall-mounted shelves and end tables extending into the corridor reducing the width of the corridor to less than 5 feet.	C 150			
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor	C 164		12" tables are in place w/ lamps to help residents see at night. There is a clearance of 56". Please reconsider. Fris Marshall approved.	

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C 164	Continued From page 3 coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, some building components were not maintained in clean, repaired condition. Findings include: a) Throughout the building the HVAC return vents and their associated radiation dampers are covered with dust and dirt which could interfere with the damper activating properly in a fire emergency. b) Room 3 has a worn chair. c) Room 6 has a missing handle on the chest of drawers	C 164			
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by improper storage of oxygen cylinders. This would affect all residents by potentially exposing them to hazards from a ruptured cylinder.	C 166			

*Repairs are scheduled
2-20-16*

*Will call supplier
to switch to approved
carrier.
2-5-16*

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C 166	Continued From page 4 Findings include: The oxygen bottles are being stored in a beverage crate that can not adequately prevent them from tipping over.		C 166		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would affect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings include: a) The attic draft wall has a 2 foot by 2 foot section of gypsum cut out of it. b) Room 6 has a wall/ceiling joint separating. ✓c) Room 2 has an unprotected ceiling penetration by phone line 2. Based on observation, the facility components were not maintained operable by having doors that did not close completely and latch.		C 189	<i>Repairs are scheduled</i> <i>2-20-16</i>	

PRINTED: 01/20/2016
 FORM APPROVED

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C 189	Continued From page 5 Findings include: a) The front exit door from the Living Room will not close and latch when released. b) The right Exit door will not close and latch when released c) The room 4 bedroom door scrubs the floor and frame and will not close and latch d) Room 3 has a loose door handle. e) Storage room door next to the Laundry has no door knob f) Room 2 has a loose door handle g) Room 6 has a door delaminating at the bottom. 3. Based on observation, the building electrical system was not maintained to keep the facility safe by allowing residents to use two-wire extension cords and expansion blocks in the outlets. This would affect all residents by potentially overloading electrical circuits in the bedrooms. Findings include: Outlet expansion devices were observed in the following locations: ✓ a) Room 6 has an outlet expansion device, ✓ b) Room 4 has an outlet expansion device, c) Room 2 has an outlet coming out of the wall. 4. Based on observation, the building exit signage was not maintained operable. Findings include: a) The Exit sign at the left exit has no battery backup.	C 189		
C 199	Exhaust Ventilation	C 199		

*Replaced w/ surge protector
1-10-16*

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C 199	Continued From page 6 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building exhaust ventilation was not maintained in accordance with this Rule. Findings include: The exhaust fan in the Ladies bathroom near the kitchen is not working.	C 199	<i>Repairs are scheduled.</i>		